

# PAPERWORK REDUCTION ACT SUBMISSION

**Please read the instructions before completing this form. For additional forms or assistance in completing this form, contact your agency's Paperwork Clearance Officer. Send two copies of this form, the collection instrument to be reviewed, the supporting statement, and any additional documentation to: Office of Information and Regulatory Affairs, Office of Management and Budget, Docket Library, Room 10102, 725 17th Street NW, Washington, DC 20503.**

1. Agency/Subagency originating request	2. OMB control number <span style="float: right;">b. <input type="checkbox"/> None</span> a. _____ - _____
3. Type of information collection ( <i>check one</i> ) a. <input type="checkbox"/> New Collection b. <input type="checkbox"/> Revision of a currently approved collection c. <input type="checkbox"/> Extension of a currently approved collection d. <input type="checkbox"/> Reinstatement, without change, of a previously approved collection for which approval has expired e. <input type="checkbox"/> Reinstatement, with change, of a previously approved collection for which approval has expired f. <input type="checkbox"/> Existing collection in use without an OMB control number For b-f, note Item A2 of Supporting Statement instructions	4. Type of review requested ( <i>check one</i> ) a. <input type="checkbox"/> Regular submission b. <input type="checkbox"/> Emergency - Approval requested by _____ / _____ / _____ c. <input type="checkbox"/> Delegated  5. Small entities Will this information collection have a significant economic impact on a substantial number of small entities? <input type="checkbox"/> Yes <input type="checkbox"/> No  6. Requested expiration date a. <input type="checkbox"/> Three years from approval date b. <input type="checkbox"/> Other Specify: _____ / _____
7. Title	
8. Agency form number(s) ( <i>if applicable</i> )	
9. Keywords	
10. Abstract	
11. Affected public ( <i>Mark primary with "P" and all others that apply with "x"</i> ) a. <input type="checkbox"/> Individuals or households d. <input type="checkbox"/> Farms b. <input type="checkbox"/> Business or other for-profit e. <input type="checkbox"/> Federal Government c. <input type="checkbox"/> Not-for-profit institutions f. <input type="checkbox"/> State, Local or Tribal Government	12. Obligation to respond ( <i>check one</i> ) a. <input type="checkbox"/> Voluntary b. <input type="checkbox"/> Required to obtain or retain benefits c. <input type="checkbox"/> Mandatory
13. Annual recordkeeping and reporting burden a. Number of respondents _____ b. Total annual responses _____ 1. Percentage of these responses collected electronically _____ % c. Total annual hours requested _____ d. Current OMB inventory _____ e. Difference _____ f. Explanation of difference 1. Program change _____ 2. Adjustment _____	14. Annual reporting and recordkeeping cost burden ( <i>in thousands of dollars</i> ) a. Total annualized capital/startup costs _____ b. Total annual costs (O&M) _____ c. Total annualized cost requested _____ d. Current OMB inventory _____ e. Difference _____ f. Explanation of difference 1. Program change _____ 2. Adjustment _____
15. Purpose of information collection ( <i>Mark primary with "P" and all others that apply with "X"</i> ) a. <input type="checkbox"/> Application for benefits e. <input type="checkbox"/> Program planning or management b. <input type="checkbox"/> Program evaluation f. <input type="checkbox"/> Research c. <input type="checkbox"/> General purpose statistics g. <input type="checkbox"/> Regulatory or compliance d. <input type="checkbox"/> Audit	16. Frequency of recordkeeping or reporting ( <i>check all that apply</i> ) a. <input type="checkbox"/> Recordkeeping b. <input type="checkbox"/> Third party disclosure c. <input type="checkbox"/> Reporting 1. <input type="checkbox"/> On occasion 2. <input type="checkbox"/> Weekly 3. <input type="checkbox"/> Monthly 4. <input type="checkbox"/> Quarterly 5. <input type="checkbox"/> Semi-annually 6. <input type="checkbox"/> Annually 7. <input type="checkbox"/> Biennially 8. <input type="checkbox"/> Other (describe) _____
17. Statistical methods Does this information collection employ statistical methods <input type="checkbox"/> Yes <input type="checkbox"/> No	18. Agency Contact (person who can best answer questions regarding the content of this submission)  Name: _____ Phone: _____

## 19. Certification for Paperwork Reduction Act Submissions

On behalf of this Federal Agency, I certify that the collection of information encompassed by this request complies with 5 CFR 1320.9

**NOTE:** The text of 5 CFR 1320.9, and the related provisions of 5 CFR 1320.8(b)(3), appear at the end of the instructions. *The certification is to be made with reference to those regulatory provisions as set forth in the instructions.*

The following is a summary of the topics, regarding the proposed collection of information, that the certification covers:

- (a) It is necessary for the proper performance of agency functions;
- (b) It avoids unnecessary duplication;
- (c) It reduces burden on small entities;
- (d) It used plain, coherent, and unambiguous terminology that is understandable to respondents;
- (e) Its implementation will be consistent and compatible with current reporting and recordkeeping practices;
- (f) It indicates the retention period for recordkeeping requirements;
- (g) It informs respondents of the information called for under 5 CFR 1320.8(b)(3):
  - (i) Why the information is being collected;
  - (ii) Use of information;
  - (iii) Burden estimate;
  - (iv) Nature of response (voluntary, required for a benefit, mandatory);
  - (v) Nature and extent of confidentiality; and
  - (vi) Need to display currently valid OMB control number;
- (h) It was developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to be collected (see note in Item 19 of instructions);
- (i) It uses effective and efficient statistical survey methodology; and
- (j) It makes appropriate use of information technology.

If you are unable to certify compliance with any of the provisions, identify the item below and explain the reason in Item 18 of the Supporting Statement.

Signature of Senior Official or designee

Date

Agency Certification (signature of Assistant Administrator or head of MB staff for L.O.s, or of the Director of a Program or Staff Office)	
Signature	Date
Signature of NOAA Clearance Officer	
Signature	Date

**SUPPORTING STATEMENT FOR COLLECTION OF INFORMATION  
AMERICAN FISHERIES ACT  
VESSEL AND PROCESSOR PERMIT APPLICATIONS  
FOR THE ALASKA BERING SEA/ALEUTIAN ISLANDS POLLOCK FISHERY**



**Prepared by  
National Marine Fisheries Service  
Alaska Region**

**INTRODUCTION**

Participation in the U.S. groundfish fisheries in the exclusive economic zone (EEZ) off Alaska grew faster than anticipated after the cessation of the foreign groundfish harvesting operations. This rapid expansion in the U.S. fishery placed increased pressure on the resource and eventually led to overcapitalization and a dangerous "race for fish" in the U.S. groundfish fisheries off Alaska.

On October 21, 1998, the President signed into law the American Fisheries Act (AFA), which imposed major structural changes on the Bering Sea and Aleutian Islands Management Area (BSAI) pollock fishery which is managed by National Marine Fisheries Service (NMFS), Alaska Region. These changes include:

- Buyout and scrapping of nine pollock factory trawlers.
- Allocation of 10 percent of the BSAI pollock total allowable catch quota (TAC) to the Western Alaska Community Development Quota (CDQ) Program (see OMB 0648-0269).

- Allocation of the remaining BSAI pollock TAC by processing sector: 50 percent to the inshore sector; 40 percent to the catcher processor (factory trawler) sector, and 10 percent to the offshore mothership sector.
- Prohibition on entry of new vessels and processors into the BSAI pollock fishery.
- Specific criteria for vessels and processors to participate in the various pollock sector fisheries, including license limitation program (LLP) qualification (see OMB 0648-0334).
- Facilitate the creation of fishing vessel cooperatives by participants from the inshore, mothership, and catcher/processor sectors.
- Allocations of pollock to individual inshore catcher vessel cooperatives formed around each inshore processor. Each cooperative is required to deliver at least 90 percent of its allocation to its “home” processor.
- Protection measures or “sideboards” to prevent BSAI pollock fishing vessels and processors from expanding their level of participation in other fisheries under the jurisdiction of the North Pacific Fishery Management Council.

Integral AFA elements are that it creates a closed class of vessels and processors that are eligible to participate in the BSAI pollock fishery and imposes restrictions on the ability of such AFA-eligible vessels and processors to participate in other fisheries. In some instances, specific vessels are listed by name in the AFA. In other instances, the AFA simply establishes qualifying criteria and requires that the Secretary of the Department of Commerce (the Secretary) identify and license AFA-authorized vessels and processors using the qualifying criteria and procedures set out in the AFA. To implement the intent of Congress as expressed in the AFA, NMFS is required to create a new set of AFA vessel and processor permits and establish a new family of application forms that AFA-eligible vessels and processors must use when applying to NMFS for AFA fishing and processing permits.

## JUSTIFICATION

### 1. Need to Conduct the Information Collection.

It is our intention to include this collection-of-information into the 0648-0206. The purpose of this collection-of-information is to allow NMFS to administer new AFA fishing, processing, and cooperative permits for the BSAI pollock fishery through application form requirements for the participants to identify and permit the vessels and processors that are eligible to participate in the BSAI pollock fishery by requiring the owners of vessels and processors to submit evidence of their qualification to participate in the BSAI pollock fishery. The NMFS Federal fisheries and processor permit systems already collect some information from the owners of vessels and processors. However, the information currently collected to administer Federal fisheries and processor permits is not adequate to administer new AFA permits because the current permit systems are not based on catch histories.

In response to the closed classes of vessels and processors established by the AFA, and fishing cooperatives authorized by the AFA, NMFS will identify and permit the participants through four separate applications plus another application to request replacement of an AFA qualified catcher vessel, catcher/processor, or mothership in the event of total or constructive loss of the qualified vessel. AFA vessel and processor permits are valid for the duration of the AFA and will expire on December 31, 2004. AFA inshore co-op permits are valid only for the fishing year for which issued, and are renewable on an annual basis.

#### AFA Catcher Vessel Permit.

A catcher vessel may be qualified to deliver BSAI pollock to an AFA catcher/processor or to one or both of a mothership or shoreside processor (inshore). All AFA catcher vessels that are qualified to deliver pollock will complete the same catcher vessel permit application.

Catcher vessels delivering to inshore processor. A catcher vessel can qualify for this category if:

- (1) It is a LLP-qualified catcher vessel determined by the Secretary to have delivered more than 250 metric

tons (mt) of pollock for processing by the inshore sector in the Bering Sea or Aleutian Islands in 1996, or 1997, or between January 1 through September 1 of 1998; or (2) It is an LLP-qualified catcher vessel less than 60 ft length overall that delivered at least 40 round weight mt of pollock for processing by the inshore sector in the Bering Sea or Aleutian Islands in 1996, or 1997, or between January 1 through September 1 of 1998.

Catcher vessel delivering to motherships (offshore sector). A catcher vessel can qualify for this category if: (1) It is one of 19 individual catcher vessels listed in the AFA Section 280(c) as eligible to harvest pollock for processing by eligible motherships; or (2) It is an LLP-qualified catcher vessel determined by the Secretary to have delivered more than 250 mt of Bering Sea or Aleutian Islands pollock for processing by motherships in the offshore component in 1996, or 1997, or between January 1 through September 1 of 1998.

Catcher vessels delivering to AFA catcher/processors (offshore sector). A catcher vessel can qualify for this category if: (1) It is one of 7 individual catcher vessels listed in the AFA Section 280(b) as eligible to harvest pollock for processing by eligible AFA catcher/processors; or (2) It is an LLP-qualified catcher vessel determined by the Secretary to have delivered at least 250 mt of Bering Sea or Aleutian Islands pollock with at least 75 percent of 1997 BSAI pollock harvested delivered to catcher/processors for processing by the offshore component.

AFA Catcher/processor permit.

A catcher/processor qualifies for this category if: (1) It is one of 20 individual catcher/processors listed in AFA Section 280(a) as eligible to harvest and process pollock in the BSAI directed pollock fishery; or (2) It is an additional LLP-qualified catcher/processor determined by the Secretary to have harvested more than 2,000 mt of pollock in the 1997 directed pollock fishery, except that such vessels are prohibited from harvesting in the aggregate a total of more than 0.5% of the pollock TAC allocated to the catcher/processor sector. This provision of the AFA took effect on January 1, 1999 and NMFS has

already issued AFA permits to all AFA catcher/processors. These permits would be renewed automatically by NMFS. Therefore, the AFA catcher/vessel permit requirement will not generate a collection of information requirement and is not included in this request.

AFA Mothership and inshore processor permit.

Motherships. A mothership can qualify for this category if it is one of 3 individual motherships listed in AFA Section 280(d) as eligible to process pollock as an AFA mothership. The AFA also places restrictions on crab processing by AFA motherships that receive pollock harvested by catcher vessels in a catcher vessel cooperative.

Inshore processors. A inshore processor can qualify to receive and processor pollock harvested in the BSAI directed pollock fishery if: (1) It is one determined by the Secretary to have processed more than 2,000 mt of pollock in 1996 or 1997; or (2) It is determined by the Secretary to have processed pollock harvested in the directed pollock fishery in 1996 or 1997, but to have processed less than 2,000 mt of pollock in each year, except that effective January 1, 2000, each such inshore processor may not process more than 2,000 mt of BSAI pollock in any year.

AFA Inshore co-op permit.

If the owners of 80 percent or more of the catcher vessels delivering to a particular inshore processor form a fishing vessel cooperative and the contract implementing the fishery cooperative meets restrictions listed below, the AFA will issue a co-op permit:

(1) The Secretary allocate an annual share of the BSAI pollock TAC for exclusive harvest by members of the cooperative;

(2) The cooperative share is equivalent to the aggregate total amount of pollock harvested by such catcher vessels in the BSAI pollock directed fishery for processing by the inshore component during 1995, 1996, and 1997 relative to the aggregate total amount of pollock harvested in the directed pollock fishery for processing by the inshore component during such years;



(3) The vessels in the cooperative deliver at least 90 percent of their pollock allocation to the processor named in their cooperative contract, and

(4) The catcher vessels in the cooperative are prohibited in the aggregate from exceeding their annual allocation of BSAI pollock.

AFA permit for replacement vessel.

A operator would complete this application to request replacement of an AFA qualified catcher vessel, catcher/processor, or mothership in the event of total or constructive loss of the qualified vessel as authorized at AFA Section 208(g).

**2. How, by whom, how frequently, and for what purpose the information will be used.**

The information will be collected on paper application forms to be notarized and submitted by participants to NMFS Restricted Access Management Program, Juneau, Alaska.. The completed applications will allow NMFS to uniquely identify the vessel and owner of the vessel and to verify and make determinations about a vessel's qualification to fish for pollock under the AFA. AFA vessel and processor permits are valid for the duration of the AFA and will expire on December 31, 2004. AFA inshore co-op permits are valid only for the fishing year for which issued, and are renewable on an annual basis.

**a. AFA Catcher vessel application**

A separate application must be completed for each associated mothership or inshore processor.

BLOCK A - Vessel information

Vessel name

Vessel Alaska Department of Fish and Game (ADF&G) number and U.S. Coast Guard (USCG) documentation number

Vessel telephone number (if any)

Gross tons, shaft horsepower, and registered length (in feet)

#### BLOCK B - Owner information

Owner name. If more than one owner, list principal owner first  
Social security number (voluntary) or tax identification number of owner  
Complete permanent business mailing address, including state and zip code. If permit must be sent to a different address, attach a note with alternate address  
Managing company name (if any)  
Business telephone, FAX number, and E-mail address of vessel owner

#### BLOCK C - Vessel AFA qualification information

Under the AFA a vessel can be qualified to deliver BSAI Pollock to an AFA Catcher/Processor **or** to one or both of the following: AFA Mothership or AFA Inshore processor. Select the catcher vessel permit type(s) for which you are applying. All claims of catch history are subject to NMFS verifications.

##### Catcher vessel delivering to AFA Catcher/processors

1. Is this vessel listed by name in the AFA Section 208(b) [see below]? Indicate YES or NO.
  - (1) AMERICAN CHALLENGER (USCG number 615085);
  - (2) FORUM STAR (USCG number 925863);
  - (3) MUIR MILACH (USCG number 611524);
  - (4) NEAHKAHNIE (USCG number 599534);
  - (5) OCEAN HARVESTER (USCG number 549892);
  - (6) SEA STORM (USCG number 628959);
  - (7) TRACY ANNE (USCG number 904859); and
2. If NO, in 1997 did this vessel deliver 250 mt of BSAI pollock and at least 75 percent of it's 1997 BSAI pollock catch to offshore catcher/processors? Indicate YES or NO.

##### Catcher vessel delivering to AFA Motherships

1. Is this vessel listed by name in the AFA Section 208(c) [see below]? Indicate YES or NO.
  - (1) ALEUTIAN CHALLENGER (USCG number 603820);
  - (2) ALYESKA (USCG number 560237);
  - (3) AMBER DAWN (USCG number 529425);
  - (4) AMERICAN BEAUTY (USCG number 613847);
  - (5) CALIFORNIA HORIZON (USCG number 590758);
  - (6) MAR-GUN (USCG number 525608);
  - (7) MARGARET LYN (USCG number 615563);
  - (8) MARK I (USCG number 509552);
  - (9) MISTY DAWN (USCG number 926647);
  - (10) NORDIC FURY (USCG number 542651);
  - (11) OCEAN LEADER (USCG number 561518);
  - (12) OCEANIC (USCG number 602279);
  - (13) PACIFIC ALLIANCE (USCG number 612084);
  - (14) PACIFIC CHALLENGER (USCG number 518937);
  - (15) PACIFIC FURY (USCG number 561934);
  - (16) PAPADO II (USCG number 536161);
  - (17) TRAVELER (USCG number 929356);
  - (18) VESTERAALEN (USCG number 611642);
  - (19) WESTERN DAWN (USCG number 524423)
2. If NO, did this vessel deliver 250 mt of BSAI pollock to AFA listed motherships in 1996, or 1997, or between January 1 through September 1, of 1998? Indicate YES or NO.

Catcher vessel delivering to AFA Inshore processor

1. Did this vessel deliver to inshore processors at least 250 mt of pollock harvested in the BSAI directed pollock fishery in 1996, or 1997, or between January 1 through September 1, of 1998? Indicate YES or NO.
2. If NO, is this vessel less than 60 feet LOA, and did it deliver to inshore processors at least 40 mt of BSAI pollock in 1996, or 1997, or between January 1 through September 1, of 1998? Indicate YES or NO.

BLOCK D - Vessel Crab Activity Information

Under regulations implementing the AFA, a vessel is ineligible to participate in any BSAI crab fishery unless that specific vessel participated in a specific crab fishery during certain qualifying years. The purpose of this section is to determine your vessel's eligibility to participate in BSAI crab fisheries. All claims of catch history are subject to NMFS verification.

Did this vessel make one or more legal landings in the following BSAI directed crab fisheries in the years indicated? Indicate YES or NO.

Bristol Bay red king crab - To obtain AFA authorization to participate in the Bristol Bay red king crab fishery, a vessel must have documented a landing of any BSAI king or Tanner crab species in 1996, 1997, *or* on or before February 7, 1998. Indicate if this vessel had such a landing in that fishery.

St. Matthew blue king crab - To obtain AFA authorization to participate in the St. Matthew blue king crab fishery, a vessel must have documented a landing in that fishery in 1995, 1996, or 1997. Indicate if this vessel had at least one such a landing.

Pribilof Islands red/blue king crab - To obtain AFA authorization to participate in the Pribilof Islands red/blue king crab fishery, a vessel must have documented a landing in that fishery in 1995, 1996, or 1997. Indicate if this vessel had at least one such landing.

Aleutian Islands (Adak) brown king crab - To obtain AFA authorization to participate in the Aleutian Islands brown king crab fishery, a vessel must have documented a landing in each of the last two years the fishery was open. Indicate if this vessel had such brown king crab landings in the 1997/1998 *and* 1998/1999 fisheries.

Aleutian Islands (Adak) red king crab - To obtain AFA authorization to participate in the Aleutian Islands red king crab fishery, a vessel must have documented a landing in each of the last two years the fishery was open. Indicate if this vessel had such red king crab landings in the 1995/1996 *and* 1998/1999 fisheries.

Opilio Tanner crab - To obtain AFA authorization to participate in the BSAI *Opilio* Tanner crab fishery, a vessel must have documented a landing in that fishery in four or more of the ten years 1988 - 1997. Indicate if this vessel had such a landing.

C. bairdi Tanner crab - To obtain AFA authorization to participate in the BSAI *C. bairdi* Tanner crab fishery, a vessel must have documented a landing in that fishery in 1995 and 1996. Indicate if this vessel had such a landing.

BLOCK E - Vessel groundfish activity information

All catcher vessels. Under regulations implementing the AFA, a vessel may be exempt from harvest limitations (sideboards) imposed on AFA catcher vessel in other groundfish fisheries if it harvested less than 5,100 mt of pollock over the 3-year period from 1995-97. To determine your vessel's eligibility for this exemption, indicate YES or NO:

**Yes** (more than 5,100 mt) [    ]

**No** (less than 5,100 mt) [    ]

If you answered **no** to question 1 above, please answer the following two questions to determine if your vessel is exempt from harvest restrictions in the shallow water and/or deep water groundfish fisheries in the GOA.

2. Did this vessel make a legal landing of a shallow water species other than Pacific cod in the GOA in 1995, 1996, or 1997? (Shallow water species are: shallow water flatfish, flathead sole, Atka mackerel and the "other groundfish" species category)      **Yes** [    ]      **No** [    ]

3. Did this vessel make a legal landing of a deep water species other than pollock in the GOA in 1995, 1996, or 1997? (Deep water species are any GOA groundfish species not in the shallow water species category)      **Yes** [    ]      **No** [    ]

**BLOCK F - Certification of applicant and notary**

Signature and printed name of owner and date of signature  
Signature and notary stamp or seal of notary public  
Date notary commission expires

### **b. AFA Permit for Replacement Vessel Application**

This application is used to request replacement of an AFA qualified catcher vessel, catcher/processor, or mothership in the event of total or constructive loss of the qualified vessel.

## BLOCK A - Identification of AFA Qualified Vessel

Vessel name

Vessel ADF&G number, USCG documentation number, and AFA permit number

Gross tons, shaft horsepower, and registered length from USCG documentation

Owner(s) name; if more than one owner, primary owner first

Social security (voluntary) or Tax ID number of owner

Business mailing address, telephone number, FAX number, and E-mail address

Indicate the last year in which this vessel harvested or processed pollock in a BSAI directed pollock fishery

How was the vessel lost or destroyed? A USCG form 2692 or insurance papers must be submitted to verify the claim.

## BLOCK B - Identification of Replacement Vessel

Vessel name

Vessel ADF&G number and USCG documentation number

Gross tons, shaft horsepower, registered length, net tons, and current length overall (in feet) from USCG documentation

Federal Fisheries Permit number, if known.

Owner(s) name; if more than one, primary owner first

Social security (voluntary) or Tax ID number

Business mailing address, telephone number, FAX number, and E-mail address

Indicate YES or NO whether the vessel was built in the U.S.

Indicate YES or NO whether the vessel has ever been rebuilt? If YES, was it rebuilt in the United States?

**BLOCK C - Certification of applicant and notary**

Signature and printed name of owner and date of signature  
Signature and notary stamp or seal of notary public  
Date notary commission expires

**c. AFA Inshore Co-op Permit**

**BLOCK A - Co-op Contact Information.**

Co-op name  
Name of Co-op representative  
Co-op business mailing address (P.O. Box or street, city, state, zip code)  
Co-op business telephone number, FAX number, and E-mail address

**BLOCK B - Co-op Processor Information**

Name and physical location of AFA Inshore Processor to whom the Co-op will deliver at least 90% of its BSAI pollock. If processor is a vessel, the single geographic location (latitude and longitude) at which the processor will process BSAI pollock under the AFA.

Federal Fishery Permit or Federal processor Permit number of the Inshore Processor, as appropriate.

**BLOCK C - Required Elements of Co-op Contract**

Indicate **YES** or **NO** whether a copy is attached of the co-op contract showing the signatures of all parties and vessel owners.

Indicate **YES** or **NO** whether a copy is attached of a letter requesting a business review letter on the fishery cooperative from the Department of Justice and any response to such request? **NOTE: This application is not valid and cannot be processed without the submission of a copy of this information.**

Indicate **YES** or **NO** if the co-op contract was signed by the owners of at least 80% of the qualified catcher vessels that delivered BSAI pollock for processing to the processor in Block B in the directed BSAI pollock fishery, in the year prior to that in which this co-op would be effective. **If NO, this Co-op cannot be authorized.**

Indicate **YES** or **NO** whether or not each catcher vessel listed in this section, during the year prior to the year in which the co-op fishing permit will be in effect, deliver more BSAI pollock to the processor listed in B(1) than to any other AFA inshore processor.

Indicate **YES** or **NO** whether or not each catcher vessel listed in this section, is otherwise eligible to fish for groundfish in the BSAI, has a valid LLP permit, has an AFA catcher vessel permit with an inshore endorsement, and has no permit sanctions or other type of sanctions against it that would prevent it from fishing for groundfish in the BSAI.

**BLOCK D - Vessel Information**

All co-op member vessels must be listed. List complete information for each Co-op member catcher vessel (attach additional pages if necessary).

Vessel Name - Enter complete vessel name as displayed in official documentation.  
ADF&G Number - Enter 5-digit ADF&G number (example: 51233).

U.S. Coast Guard Number - Enter USCG documentation number (example: 566722)  
or state registration number (example: AK3456C).  
AFA Permit Number - Enter the AFA Permit Number.

**BLOCK E - Certification of notary and applicant**

Signature and printed name of co-op representative and date of signature

Signature and notary stamp or seal of notary public

**Faxed applications will not be processed.**

**d. AFA mothership & inshore processor application**

A separate application must be completed for each mothership or inshore processor.

**BLOCK A - Type of permit requested**

Type of processor. Check either mothership or inshore processor. If a mothership, must be one of the following (listed in paragraphs 208(d)(1) through (3) of the AFA): Excellence, Golden Alaska, or Ocean Phoenix.

AFA Co-op endorsement. Check to indicate amount of pollock processed:

more than 2,000 round metric tons of BSAI pollock during both years 1996 and 1997; or

less than 2,000 round metric tons of BSAI pollock during either or both years, 1996 or 1997

Do you intend to receive fish for processing from an AFA CO-OP: indicate YES or NO. If YES, you must also complete Block E.

If the list of crab facilities owned (10% or more) disclosed in Block E changes, an amended application must be submitted within 30 days of the date of the change.

**BLOCK B - Vessel Information**

Complete Block B if the permit is for a Mothership or for a vessel that qualifies as an inshore processor that processed fish from the BSAI pollock fishery in 1996 and 1997 at a single geographic location in Alaska State Waters .

Vessel name, ADF&G number and USCG documentation number

Federal fisheries permit number, if a mothership; Federal processor permit number if a vessel that qualifies as an inshore processor

Gross tons, shaft horsepower, and registered length (feet) from USCG documentation/registration

**BLOCK C - Shoreside Processor Information**

Complete Block C if a shoreside processor or a vessel that qualifies as an inshore processor. A shoreside processor means “any person or vessel that receives unprocessed fish, except catcher/processors, motherships, buying stations, restaurants, or persons receiving fish for personal consumption or bait”. A vessel that qualifies as an inshore processor is one that processed fish from the BSAI pollock fishery in 1996 and 1997 at a single geographic location in Alaska State Waters.

Processor name and Federal processor permit number

Business street address of processing plant or if a vessel, single geographic location of pollock processing activity (latitude/longitude)

Business telephone number, FAX number, and E-mail address

**BLOCK D - Owner Information**

Enter owner information for the vessel listed in Block B or the Shoreside Processor listed in Block C.

Owner name. If more than one owner, list principal owner first

Social security number (voluntary) or tax identification number of owner

Owner business mailing address, including state and zip code. If permit must be sent to a different address, attach a note with alternate address

Managing company name (if any), business telephone number, FAX number, and E-mail address

**BLOCK E - Crab Facility Ownership Information**

Complete Block E if you intend to receive fish from an AFA Co-op. ***If a change occurs in the list of crab facilities (owned 10% or more) disclosed in Block E, you must submit an amended application within 30 days of the date of the change.***

Crab facility name. Indicate the name of any crab facility in which the owners (Down to the individual person level) of the AFA inshore processor in Block B collectively have a 10% or greater ownership interest in any facility that processes Bering Sea or Aleutian Island king or Tanner crab..

Type of facility. Indicate inshore processor, catcher/processor, or mothership.

Percent of collective ownership of crab facility. Indicate the total percent of ownership

ADF&G processor code and Federal fisheries permit or Federal processor permit number of owned crab facility.

**BLOCK F - Certification of notary and applicant**

Signature and printed name of owner and date of signature

Signature and notary stamp or seal of notary public

Date notary commission expires

**3. Use of improved technology to reduce burden.**

The application forms will be posted on the NMFS Alaska Region Home Page for viewing by the public. Otherwise, this information collection does not involve the use of automated, electronic, mechanical, or other forms of information technology. For legal and enforcement reasons, the application forms must be submitted on paper with the notarized signature of the vessel owner. These AFA pollock permits will not replace the need for these persons to obtain other groundfish and IFQ permits. Permit accounting for each of these programs is done separately by NMFS.

**4. Efforts to identify duplication.**

While some of the data fields in these permit applications duplicate the data collected for other permit programs (see OMB 0648-0206), it is necessary to identify the universe of participating vessels and processors prior to the start of each fishing year in order to assign allocations of pollock TAC to eligible groups of vessels that form cooperatives. None of the existing permit programs in place for the groundfish fisheries off Alaska collect the information necessary to issue permits under the AFA. For this reason, new

permits and permit applications are required. NMFS considered the idea of expanding existing Alaska Federal fisheries permit applications to include all of the information necessary to administer AFA permits. However, this idea was rejected as unnecessarily burdensome to the thousands of non-AFA vessels that currently apply for Alaska Federal fishery permits and for whom this additional information collection burden would have no value. Other permit programs such as the Alaska LLP may appear duplicative to the AFA permit program but are not. The LLP program issues transferrable permits to fishermen not vessels. LLP permits are freely transferrable and include species and gear endorsements for fisheries unrelated to the BSAI pollock fishery. The AFA establishes a closed class of vessels for the pollock fishery only meaning that AFA permits will be non-transferrable. Neither program can serve as a substitute for the other.

**5. Methods to minimize the burden on small entities.**

The proposed collection-of-information does not impose a significant impact on small entities.

**6. Consequences to Federal program activities if the collection were conducted less frequently.**

If the information were not collected, NMFS would be unable to implement the provisions of the AFA as mandated by Congress. The information must be collected once a year because NMFS must identify the universe of participating vessels and processors prior to the start of each fishing year in order to assign allocations of pollock TAC to eligible groups of vessels that form cooperatives.

**7. Special circumstances.**

No special circumstances exist.



**8. Public comment or consultation on the information collection.**

The NMFS Alaska Region will submit a an emergency rule for publication in the Federal Register simultaneously with this request.

NMFS presented the proposed requirements at the April and June 1999 meetings of the North Pacific Fishery Management Council and provided an opportunity for public comment. In addition, NMFS held a 3-day workshop with pollock industry representatives in Seattle, Washington, from May 17-19, 1999 to develop the basic structure of the program.

**9. Payment or gift to respondents.**

No payment or gift is provided under this program.

**10. Assurance of confidentiality provided to respondents and the basis for this assurance in statute, regulation, or agency policy.**

The Privacy Act does apply to this collection-of-information because the social security number is requested on a voluntary basis. The social security number is needed basically to avoid inappropriate release of data: to distinguish between same names; to ensure that the records go to the same person through the use of this personal ID; when there are several operators on a vessel owned by a different individual, ensure that the confidential data of each operator is protected; with mis-spellings and possible duplications, it is necessary to select a unique identifier to find records in the database; and prevents release of confidential data to the wrong person.

**11. Collection of information of a private and sensitive nature.**

This collection of information requests the social security number (see item 10).

**12/13/14. Total burden hours and annual costs of the collection-of-information for respondents and Federal Government.**

The application forms are presented in Attachment 1. No capital or significant start-up costs are associated with this collection-of-information. Miscellaneous costs associated with the collection of information include mailing materials and notary public services. Estimate of the total burden hours and total annual cost per year for all respondents and for the Federal Government are presented in Table 1.

**15. Program changes or adjustments.**

This is a new collection-of-information.

**16. Plans for tabulation and publication.**

The results of this collection-of-information will not be published.

**17. Expiration date for OMB approval of the information collection.**

In accordance with OMB requirements, the control number and expiration date of OMB approval will be shown on all forms associated with this program.

**18. Exception to the certification statement.**

No exceptions to the certification statement exist under this renewal.

Table 1. Summary of Total Burden Hours and Annual Costs of the Collection-of-information for Respondents and Federal Government (sheet 1 of 2)

Application Description	Respondent			Federal Government	
	Time (hr)	Personnel Cost (\$)	Miscellaneous Cost (\$)	Time (hr)	Personnel Cost (\$)
<b>Mothership &amp; inshore processor application</b>					
Total annual responses	11			11	
Estimated hours per response	2			1	
<b>Total response hours</b>	22			11	
Personnel cost per hour (average wage equivalent to a GS-7 employee in Alaska, including COLA)		\$20			\$20
<b>Total personnel cost</b>		\$440			\$220
Annual postage (.35 x 11)			\$4		
Annual photocopy (2 x .10 x 11)			\$2		
Annual notary public (5 x 11)			\$55		
<b>Total miscellaneous cost</b>			\$61		
<b>Inshore Co-Op Application</b>					
Total annual responses	8			8	
Estimated hours per response	2			1	
<b>Total response hours</b>	16			8	
Personnel cost per hour (average wage equivalent to a GS-7 employee in Alaska, including COLA)		\$20			\$20
<b>Total personnel cost</b>		\$320			\$160
Annual postage (.35 x )			\$2		
Annual photocopy (2 x .10 x 8)			\$2		
Annual notary public (5 x 8)			\$40		
<b>Total miscellaneous cost</b>			\$44		

Table 1. Summary of Total Burden Hours and Annual Costs of the Collection-of-information for Respondents and Federal Government (sheet 2 of 2)

Application Description	Respondent			Federal Government	
	Time (hr)	Personnel Cost (\$)	Miscellaneous Cost (\$)	Time (hr)	Personnel Cost (\$)
<b>Catcher vessel (inshore, offshore, or mothership) application</b>					
Total annual responses	121			121	
Estimated hours per response	2			1	
<b>Total response hours</b>	242			121	
Personnel cost per hour		\$20			\$20
(average wage equivalent to a GS-7 employee in Alaska, including COLA)					
<b>Total personnel cost</b>		\$4,840			\$2,420
Annual postage (.35 x 121)			\$42		
Annual photocopy (2 x .10 x 121)			\$24		
Annual notary public (5 x 121)			\$605		
<b>Total miscellaneous cost</b>			\$671		
<b>AFA Replacement vessel application</b>					
Total annual responses	1			1	
Estimated hours per response	0.5			1	
<b>Total response hours</b>	0.5			1	
Personnel cost per hour		\$20			\$20
(average wage equivalent to a GS-7 employee in Alaska, including COLA)					
<b>Total personnel cost</b>		\$10			\$20
Annual postage (.35 x 1)			\$1		
Annual photocopy (2 x .10 x 1)			\$1		
Annual notary public (5 x 1)			\$5		
<b>Total miscellaneous cost</b>			\$7		



**APPLICATION FOR  
AMERICAN FISHERIES ACT  
(AFA)  
CATCHER VESSEL  
PERMIT**

United States Department of Commerce  
National Oceanic and Atmospheric Administration  
National Marine Fisheries Service  
Alaska Region  
P.O. Box 21668  
Juneau, Alaska 99802-1668



**BLOCK A - VESSEL INFORMATION**

1. Vessel Name		
2. ADF&G Number	3. U.S. Coast Guard Number	4. Vessel Telephone Number
5. Gross Tons	6. Shaft Horsepower	7. Registered Length

**BLOCK B - OWNER INFORMATION**

1. Owner Name(s)		2. SSN or Tax ID Number
3. Business Mailing Address (Street or box, city, state, zip code)		
4. Managing Company, if any		
5. Business Telephone Number	6. Business FAX Number	7. Business E-mail Address

**BLOCK C - VESSEL AFA QUALIFICATION INFORMATION**

Under the AFA you can be qualified to deliver BSAI Pollock to an AFA Catcher/Processor **or** to one or both of the following: AFA Mothership or AFA Inshore processor. **Check select the catcher vessel permit type(s) for which you are applying.**

**[ ] CATCHER VESSEL DELIVERING TO AFA CATCHER/PROCESSORS**

1. Is this vessel listed by name in the AFA Section 208(b) [see instructions]? Yes [ ] No [ ]
2. If No, In 1997 did this vessel deliver 250 mt of BSAI Pollock and at least 75 percent of it's 1997 BSAI pollock catch to offshore catcher/processors? Yes [ ] No [ ]

**[ ] CATCHER VESSEL DELIVERING TO AFA MOTHERSHIPS**

1. Is this vessel listed by name in the AFA Section 208(c) [see instructions]? Yes [ ] No [ ]
2. If No, did this vessel deliver at least 250 mt of BSAI pollock to AFA listed motherships in 1996, or 1997, or January 1 through September 1 of 1998? Yes [ ] No [ ]

**[ ] CATCHER VESSEL DELIVERING TO AFA INSHORE PROCESSORS**

1. Did this vessel deliver to inshore processors at least 250 mt of Pollock harvested in the BSAI directed Pollock fishery in 1996, or 1997, or between January 1 through September 1 of 1998? Yes [ ] No [ ]
2. If No, is this vessel less than 60 feet LOA, and did it deliver to inshore processors at least 40 mt of BSAI pollock in 1996, or 1997, or between January 1 through September 1 of 1998? Yes [ ] No [ ]

### **BLOCK D - VESSEL CRAB ACTIVITY INFORMATION**

**All Catcher Vessels.** Under regulations implementing the AFA, a vessel is ineligible to participate in any BSAI crab fishery unless that specific vessel participated in a specific crab fishery during certain qualifying years. The purpose of this section is to determine your vessel's eligibility to participate in BSAI crab fisheries. All claims of catch history are subject to NMFS verification

Did this vessel make one or more legal landings in the following BSAI directed crab fisheries in the years indicated?

1. Any BSAI king or Tanner crab species in 1996, 1997, **or** on or before February 7, 1998? Yes [ ] No [ ]
2. St. Matthew blue king crab fishery in 1995, 1996, **or** 1997? Yes [ ] No [ ]
3. Pribilof Islands red/blue king crab fishery in 1995, 1996, **or** 1997? Yes [ ] No [ ]
4. Aleutian Islands (Adak) brown king crab in the 1997/1998 **and** 1998/1999 fishery? Yes [ ] No [ ]
5. Aleutian Islands (Adak) red king crab fishery in the 1995/1996 **and** 1998/1999 fishery? Yes [ ] No [ ]
6. *Opilio* Tanner crab fishery in four or more years from 1988-1997? Yes [ ] No [ ]
7. *C. bairdi* Tanner crab fishery in 1995 and 1996? Yes [ ] No [ ]

### **BLOCK E - VESSEL GROUND FISH ACTIVITY INFORMATION**

**All Catcher Vessels.** Under regulations implementing the AFA, a vessel may be exempt from harvest limitations (sideboards) imposed on AFA catcher vessels in other groundfish fisheries if it harvested less than 5,100 mt of pollock over the 3-year period from 1995 to 1997. To determine your vessel's eligibility for this exemption, please check one of the following.

1. During the years 1995, 1996, and 1997, did this vessel make a combined total of more than 5,100 mt of BSAI pollock landings? Include all BSAI pollock landings made to all sectors (inshore, motherships, and catcher/processors) during all three years.

**Yes** (more than 5,100 mt) [ ]

**No** (less than 5,100 mt) [ ]

If you answered **no** to question 1 above, please answer the following two questions to determine if your vessel is exempt from harvest restrictions in the shallow water and/or deep water groundfish fisheries in the GOA.

2. Did this vessel make a legal landing of a shallow water species other than Pacific cod in the GOA in 1995, 1996, or 1997? (Shallow water species are: shallow water flatfish, flathead sole, Atka mackerel and the "other groundfish" species category)  
Yes [ ] No [ ]
3. Did this vessel make a legal landing of a deep water species other than pollock in the GOA in 1995, 1996, or 1997? (Deep water species are any GOA groundfish species not in the shallow water species category)  
Yes [ ] No [ ]

**BLOCK F- CERTIFICATION OF NOTARY AND APPLICANT**

Under penalty of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information presented hereon is true, correct and complete.

1. Signature of Owner

2. Date

3. Printed Name of Owner

4. Notary Public (Signature):        ATTEST

6. Affix Notary Stamp or Seal Here:

5. Commission Expires:

**PRIVACY ACT STATEMENT:** *Your social security number (SSN) is confidential and is protected under the Privacy Act. Disclosure of your SSN is voluntary. The primary purpose for soliciting the SSN is to provide a unique identifier to verify the identity of the applicant(s) for issuance of a federal fishery permit and to avoid inappropriate release of confidential records related to federal commercial fishery permits. In the event it is not provided, NMFS will assign a unique code that will identify your records.*

Please mail completed application to **NMFS Alaska Region, Restricted Access Management, P.O. Box 21668, Juneau, AK 99802-1668**. If you need additional information, contact RAM at 1-800-304-4846 or 907-586-7202.

**PUBLIC REPORTING BURDEN STATEMENT**

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing the instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sustainable Fisheries, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802.

**ADDITIONAL INFORMATION**

Before completing this form please note the following: 1) The NMFS may not conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) This information is being used to implement the American Fisheries Act; 3) Federal law and regulations require and authorize NMFS to manage commercial fishing effort



**INSTRUCTIONS**  
**Application for**  
**American Fisheries Act (AFA)**  
**Catcher Vessel Permits**



A separate application must be completed for each catcher vessel. Type or print legibly in ink; retain a copy of completed application for your records. Completed forms should be mailed to: **National Marine Fisheries Service (NMFS) Alaska Region, RAM, P.O. Box 21668, Juneau, AK 99802-1668.** If you need information, contact RAM at 1-800-304-4846 or 907-586-7202. **Please allow at least 10 working days for your application to be processed.** Items will be sent by first class mail, unless you provide alternate instructions *and* include a prepaid mailer with appropriate postage or a corporate account number for express delivery

**BLOCK A - VESSEL INFORMATION**

1. Vessel Name - Enter complete vessel name as displayed in official documentation.
2. ADF&G Number - Enter 5-digit State of Alaska Department of Fish & Game (ADF&G) number (example: 51233).
3. U.S. Coast Guard Number - Enter U.S. Coast Guard (USCG) documentation number (example: 566722) or state registration number (example: AK3456C).
4. Vessel telephone number
5. Gross tons - Enter gross Tons from USCG documentation/registration.
6. Shaft horsepower - Enter shaft horsepower USCG documentation/registration.
7. Registered length - Enter registered length (in feet) from USCG documentation/registration.

**BLOCK B - OWNER INFORMATION**

Enter owner information for the vessel listed in Block A

1. Owner Name(s) - Enter the full name(s) of the vessel owner(s). If there is more than one owner, list the principal owner first; the permit will be issued to the first owner listed, with an *et al.* notation. The permit **MUST** be issued to the owner of the vessel, not operators or lessees.
2. Social Security Number or Tax Identification Number - Enter social security number or tax identification number of owner.  
**PRIVACY ACT STATEMENT:** *Your social security number is confidential and is protected under the Privacy Act. Disclosure of your Social Security Number (SSN) is voluntary. The primary purpose for soliciting the social security number is to provide a unique identifier to verify the identity of the applicant(s) for issuance of a federal fishery permit and to avoid inappropriate release of confidential records related to federal commercial fishery permits. In the event it is not provided, NMFS will assign a unique code that will identify your records.*
3. Business Mailing Address - Enter your complete PERMANENT business mailing address, including state and zip code. Your permit will be sent to this address. If you need to have your permit sent to a different address, please enter your PERMANENT business address on the application and attach a note with your alternate address.
4. Managing Company. Enter the name of any company (other than the owner) that manages the operations of your vessel.
5. Business Telephone Number - Enter business telephone number used by the vessel owner, including area code. It is very important that you provide a telephone number where we can contact you, or where we can leave messages for you; if questions arise concerning your application and we cannot contact you by telephone, issuance of your permit will be delayed.
6. Business FAX Number - Enter business FAX number used by the vessel owner, including area code.
7. Business E-mail address - Enter business E-mail used by the vessel owner. It is very important that you provide a telephone number where we can contact you, or where we can leave messages for you; if questions arise concerning your application and we cannot contact you by telephone, issuance of your permit will be delayed.

**BLOCK C - VESSEL AFA QUALIFICATION INFORMATION**

Under the AFA a vessel can be qualified to deliver BSAI Pollock to an AFA Catcher/Processor **or** to one or both of the following: AFA Mothership or AFA Inshore processor. Select the catcher vessel permit type(s) for which you are applying. All claims of catch history are subject to NMFS verifications.



Catcher vessel delivering to AFA Catcher/processors

1. Is this vessel listed by name in the AFA Section 208(b) [see below]? Indicate YES or NO.
  - (1) AMERICAN CHALLENGER (USCG number 615085);
  - (2) FORUM STAR (USCG number 925863);
  - (3) MUIR MILACH (USCG number 611524);
  - (4) NEAHKAHNIE (USCG number 599534);
  - (5) OCEAN HARVESTER (USCG number 549892);
  - (6) SEA STORM (USCG number 628959);
  - (7) TRACY ANNE (USCG number 904859); and
2. If NO, in 1997 did this vessel deliver 250 mt of BSAI pollock and at least 75 percent of it's 1997 BSAI pollock catch to offshore catcher/processors? Indicate YES or NO.

Catcher vessel delivering to AFA Motherships

1. Is this vessel listed by name in the AFA Section 208(c) [see below]? Indicate YES or NO.
  - (1) ALEUTIAN CHALLENGER (USCG number 603820);
  - (2) ALYESKA (USCG number 560237);
  - (3) AMBER DAWN (USCG number 529425);
  - (4) AMERICAN BEAUTY (USCG number 613847);
  - (5) CALIFORNIA HORIZON (USCG number 590758);
  - (6) MAR-GUN (USCG number 525608);
  - (7) MARGARET LYN (USCG number 615563);
  - (8) MARK I (USCG number 509552);
  - (9) MISTY DAWN (USCG number 926647);
  - (10) NORDIC FURY (USCG number 542651);
  - (11) OCEAN LEADER (USCG number 561518);
  - (12) OCEANIC (USCG number 602279);
  - (13) PACIFIC ALLIANCE (USCG number 612084);
  - (14) PACIFIC CHALLENGER (USCG number 518937);
  - (15) PACIFIC FURY (USCG number 561934);
  - (16) PAPADO II (USCG number 536161);
  - (17) TRAVELER (USCG number 929356);
  - (18) VESTERAALEN (USCG number 611642);
  - (19) WESTERN DAWN (USCG number 524423)
2. If NO, did this vessel deliver 250 mt of BSAI pollock to AFA listed motherships in 1996, or 1997, or between January 1 through September 1, of 1998? Indicate YES or NO.

Catcher vessel delivering to AFA Inshore processor

1. Did this vessel deliver to inshore processors at least 250 mt of pollock harvested in the BSAI directed pollock fishery in 1996, or 1997, or between January 1 through September 1, of 1998? Indicate YES or NO.
2. If NO, is this vessel less than 60 feet LOA, and did it deliver to inshore processors at least 40 mt of BSAI pollock in 1996, or 1997, or between January 1 through September 1, of 1998? Indicate YES or NO.

***BLOCK D - VESSEL CRAB ACTIVITY INFORMATION***

Under regulations implementing the AFA, a vessel is ineligible to participate in any BSAI crab fishery unless that specific vessel participated in a specific crab fishery during certain qualifying years. The purpose of this section is to determine your vessel's eligibility to participate in BSAI crab fisheries.

Did this vessel make one or more legal landings in the following BSAI directed crab fisheries in the years indicated? Indicate YES or NO.

1. Bristol Bay red king crab - To obtain AFA authorization to participate in the Bristol Bay red king crab fishery, a vessel must have documented a landing of any BSAI king or Tanner crab species in 1996, 1997, **or** on or before February 7, 1998. Indicate if this vessel had such a landing in that fishery.
2. St. Matthew blue king crab - To obtain AFA authorization to participate in the St. Matthew blue king crab fishery, a vessel must have documented a landing in that fishery in 1995, 1996, or 1997. Indicate if this vessel had at least one such a landing.

3. Pribilof Islands red/blue king crab - To obtain AFA authorization to participate in the Pribilof Islands red/blue king crab fishery, a vessel must have documented a landing in that fishery in 1995, 1996, or 1997. Indicate if this vessel had at least one such landing.
4. Aleutian Islands (Adak) brown king crab - To obtain AFA authorization to participate in the Aleutian Islands brown king crab fishery, a vessel must have documented a landings in each of the last two years the fishery was open. Indicate if this vessel had such brown king crab landings in the 1997/1998 *and* 1998/1999 fisheries.
5. Aleutian Islands (Adak) red king crab - To obtain AFA authorization to participate in the Aleutian Islands red king crab fishery, a vessel must have documented a landings in each of the last two years the fishery was open. Indicate if this vessel had such red king crab landings in the 1995/1996 *and* 1998/1999 fisheries.
6. Opilio Tanner crab - To obtain AFA authorization to participate in the BSAI *Opilio* Tanner crab fishery, a vessel must have documented a landing in that fishery in four or more of the ten years 1988 - 1997. Indicate if this vessel had such a landing.
7. C. bairdi Tanner crab - To obtain AFA authorization to participate in the BSAI *C. bairdi* Tanner crab fishery, a vessel must have documented a landing in that fishery in 1995 and 1996.

#### **BLOCK E - VESSEL GROUND FISH ACTIVITY INFORMATION**

**All catcher vessels.** Under regulations implementing the AFA, a vessel may be exempt from harvest limitations (sideboards) imposed on AFA catcher vessels in other groundfish fisheries if it harvested less than 5,100 mt of pollock over the 3-year period from 1995-1997. To determine your vessel's eligibility for this exemption, please check one of the following:

1. During the years 1995, 1996, and 1997, did this vessel make a combined total of more than 5,100 mt of BSAI pollock landings? Include all BSAI pollock landings made to all sectors (inshore, motherships, and catcher/processors) during all three years.  

<b>Yes</b> (more than 5,100 mt)	[    ]
<b>No</b> (less than 5,100 mt)	[    ]

If you answered **no** to question 1 above, please answer the following two questions to determine if your vessel is exempt from harvest restrictions in the shallow water and/or deep water groundfish fisheries in the GOA.

2. Did this vessel make a legal landing of a shallow water species other than Pacific cod in the GOA in 1995, 1996, or 1997? (Shallow water species are: shallow water flatfish, flathead sole, Atka mackerel and the "other groundfish" species category)  
Yes [    ]    No [    ]
3. Did this vessel make a legal landing of a deep water species other than pollock in the GOA in 1995, 1996, or 1997? (Deep water species are any GOA groundfish species not in the shallow water species category)  
Yes [    ]    No [    ]

#### **BLOCK F - CERTIFICATION OF NOTARY AND APPLICANT**

Sign, print and date the application in the presence of Notary Public. As a result of this requirement, **we will not process applications faxed to us.** Representatives acting on behalf of an applicant must submit proof of authorization to submit this application on their behalf.

1. Signature of the owner.
2. Date this application was signed.
3. Printed name of the owner.
- 4-6. Notary Certification. A Notary Public must Attest and affix Notary Stamp. Notary Public verification cannot be completed by the person submitting this application.

---

***PUBLIC REPORTING BURDEN STATEMENT***

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sustainable Fisheries, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802.

***ADDITIONAL INFORMATION***

Before completing this form please note the following: 1) The NMFS may not conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) This information is being used to implement the American Fisheries Act; 3) Federal law and regulations require and authorize NMFS to manage commercial fishing effort; 4) Submission of applicant's name is required of all persons seeking to participate in the groundfish fisheries

---



**APPLICATION  
FOR AMERICAN  
FISHERIES ACT (AFA)  
MOTHERSHIP &  
INSHORE PROCESSOR  
PERMIT**

United States Department of Commerce  
National Oceanic and Atmospheric Administration  
National Marine Fisheries Service  
Alaska Region  
P.O. Box 21668  
Juneau, Alaska 99802-1668



**BLOCK A - TYPE OF PERMIT REQUESTED**

**To be an AFA Inshore Processor you must have processed BSAI pollock in both 1996 and 1997.**

**To be an AFA Mothership your vessel must be one of the three named in the AFA, Section 208(d).**

1. Type of processor: Mothership\_\_\_\_\_ Inshore Processor\_\_\_\_\_

If you selected Inshore Processor, indicate round weight amounts of pollock you processed:

☐ more than 2,000 round mt of BSAI pollock during both years 1996 and 1997; **or**

☐ less than 2,000 round mt of BSAI pollock during either or both years 1996 or 1997.

2. AFA Co-op Endorsement. Do you intend to receive fish for processing from an AFA Co-op? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, you must also complete Block E.

**BLOCK B - VESSEL INFORMATION**

1. Vessel Name

2. ADF&G Number

3. U.S. Coast Guard Number

4. Federal Fisheries or Federal  
Processor Permit Number

5. Gross Tons

6. Shaft Horsepower

7. Registered Length (Feet)

**BLOCK C - SHORESIDE PROCESSOR INFORMATION**

1. Processor Name

2. Federal Processor Permit Number

3. Address. If Shoreside Processor, Street Address (Street, city, state, zip code). If a Vessel, Single Geographic Location (latitude/longitude) of Pollock Processing Activity

4. Business Telephone Number

5. Business FAX Number

6. Business E-mail Address

**BLOCK D - OWNER INFORMATION**

1. Owner Name(s)

2. SSN or Tax ID Number

3. Business Mailing Address (Street or box, city, state, zip code)

4. Managing Company, if any

5. Managing Company Telephone  
Number

6. Managing Company FAX Number

7. Managing Company E-mail Address

**BLOCK E - CRAB FACILITY OWNERSHIP INFORMATION**

Do the owners (down to the individual person level) of the AFA inshore processor in block B or C collectively have a 10% or greater ownership interest in any facility that processes Bering Sea or Aleutian Island King or Tanner Crab. (A facility includes any processing plant, catcher/processor, mothership, floating processor or any other operation that processes crab.)

Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, you must provide the following information for each crab facility owned at the 10% level. Attach additional sheets if necessary:

**Note: if the list of crab facilities owned (10% or more) changes, you must submit an amended application to NMFS, RAM within 30 days of the date of the change.**

1. Crab Facility Name:		2. Type of Facility (see instructions):
3. Percent of collective ownership of crab facility:	4. ADF&G Processor Code of owned crab facility: F _____	5. Federal Fishery or Federal Processor Permit Number of owned crab facility:
1. Crab Facility Name:		2. Type of Facility (see instructions):
3. Percent of collective ownership of crab facility:	4. ADF&G Processor Code of owned crab facility: F _____	5. Federal Fishery or Federal Processor Permit Number of owned crab facility:
1. Crab Facility Name:		2. Type of Facility (see instructions):
3. Percent of collective ownership of crab facility:	4. ADF&G Processor Code of owned crab facility: F _____	5. Federal Fishery or Federal Processor Permit Number of owned crab facility:

**BLOCK F- CERTIFICATION OF NOTARY AND APPLICANT**

Under penalty of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information presented hereon is true, correct and complete.

1. Signature of owner:		2. Date:
3. Printed Name of owner:		
4. Notary Public (Signature):      ATTEST		6. Affix Notary Stamp or Seal Here:
5. Commission Expires:		

Please mail completed application to NMFS Alaska Region, Restricted Access Management, P.O. Box 21668, Juneau, AK 99802-1668. If you need additional information, contact RAM at 1-800-304-4846 or 907-586-7202.

**PRIVACY ACT STATEMENT:** Your social security number is confidential and is protected under the Privacy Act. Disclosure of your Social Security Number (SSN) is voluntary. The primary purpose for soliciting the social security number is to provide a unique identifier to verify the identity of the applicant(s) for issuance of a federal fishery permit and to avoid inappropriate release of confidential records related to federal commercial fishery permits. In the event it is not provided, NMFS will assign a unique code that will identify your records

### ***PUBLIC REPORTING BURDEN STATEMENT***

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing the instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sustainable Fisheries, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802.

### ***ADDITIONAL INFORMATION***

Before completing this form please note the following: 1) The NMFS may not conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) This information is being used to implement the American Fisheries Act; 3) Federal law and regulations require and authorize NMFS to manage commercial fishing effort; 4) Submission of this information is required of persons requesting replacement of certificates, permits or cards.



10/27/99

## INSTRUCTIONS Application for American Fisheries Act (AFA) Mothership & Inshore Processors Permit

A separate application must be completed for each Mothership or Inshore processor. Type or print legibly in ink; retain a copy of completed application. Completed forms should be mailed to: National Marine Fisheries Service (NMFS), Restricted Access Management (RAM), P.O. Box 21668, Juneau, AK 99802-1668. If you have questions about these permits, please call RAM at 907-586-7202 or 1-800-304-4846.

### ***BLOCK A - TYPE OF PERMIT REQUESTED***

To be an **AFA Inshore Processor** you had to have processed BSAI pollock in both 1996 and 1997.

To be an **AFA Mothership Processor** you must be named in the AFA, Section 208(d) [see below].

- (1) EXCELLENCE (United States Coast Guard (USCG) number 967502);
  - (2) GOLDEN ALASKA (USCG number 651041); and
  - (3) OCEAN PHOENIX (USCG number 296779).
1. Type of Processor - Check either Mothership or Inshore processor. If you select Inshore processor, indicate the choice that describes round weight amounts of pollock you processed from the directed BSAI pollock fishery in 1996 and 1997.
  2. AFA Co-op Endorsement - Do you intend to receive fish for processing from an AFA Co-op? Indicate YES or NO. If YES, you must also complete Block E. **And, if the list of crab facilities owned (10% or more) disclosed in Block E changes, you must submit an amended application within 30 days of the date of the change.**

### ***BLOCK B - VESSEL INFORMATION***

Complete Block B if your vessel is a mothership or a vessel that qualifies as an inshore processor.

1. Vessel Name - Enter complete vessel name as displayed in official documentation.
2. ADF&G Number - Enter 5-digit State of Alaska Department of Fish & Game (ADF&G) number (example: 51233).
3. U.S. Coast Guard Number - Enter U.S. Coast Guard (USCG) documentation number (example: 566722) or state registration number (example: AK3456C).
4. Federal Fisheries Permit Number - Enter the Federal Fisheries permit number for the vessel.
5. Gross Tons of qualified vessel from USCG documentation/registration.
6. Shaft Horsepower of qualified vessel from USCG documentation/registration.
7. Registered Length (in feet) of qualified vessel from USCG documentation/registration.

### ***BLOCK C - SHORESIDE PROCESSOR INFORMATION***

Complete Block C if a shoreside processor or a vessel that qualifies as an inshore processor. A shoreside processor means "any person or vessel that receives unprocessed fish, except catcher/processors, motherships, buying stations, restaurants, or persons receiving fish for personal consumption or bait". A vessel that qualifies as an inshore processor is one that processed fish from the BSAI pollock fishery in 1996 and 1997 at a single geographic location in Alaska State Waters.

1. Processor Name - Enter complete name as displayed in official documentation.
2. Federal Processor Permit Number - Enter the Federal Processor Permit number of the shoreside processor
3. Address - Enter complete street address of the shoreside processing facility, including street number, city, state and zip code.  
If a vessel that qualifies as an inshore processor, enter single geographic location of pollock processing activity (latitude/longitude)
4. Business Telephone Number - Enter business telephone number, including area code.
5. Business FAX Number - Enter business FAX number, including area code.
6. Business E-mail Address - Enter E-mail address, if any.

### ***BLOCK D - OWNER INFORMATION***

Enter owner information for the vessel listed in Block B or the Shoreside Processor listed in Block C.

1. Owner Name(s) - Enter the full name(s) of the vessel or processor owner(s). If there is more than one owner, list the principal owner first. The permit will be issued to the first owner listed, with an *et al.* notation. The permit **MUST** be issued to the owner of the vessel or processor, not operators or lessees.
2. Social Security Number or Tax Identification Number - Enter social security number or tax identification number of owner.

**PRIVACY ACT STATEMENT:** Your social security number is confidential and is protected under the Privacy Act. Disclosure of your Social Security Number (SSN) is voluntary. The primary purpose for soliciting the social security number is to provide a unique identifier to verify the identity of the applicant(s) for issuance of a federal fishery permit and to avoid inappropriate release of confidential records related to federal commercial fishery permits. In the event it is not provided, NMFS will assign a unique code that will identify your records.

3. Business Mailing Address - Enter your complete PERMANENT business mailing address, including state and zip code. Your permit will be sent to this address. If you need to have your permit sent to a different address, please enter your PERMANENT business address on the application and attach a note with your alternate address.
4. Managing Company - Enter the name of any company (other than the owner) that manages the operations of your vessel or processor.
5. Managing company Telephone Number - Enter business telephone number of the managing company, including area code. It is very important that you provide a telephone number where we can contact you, or where we can leave messages for you; if questions arise concerning your application and we cannot contact you by telephone, issuance of your permit will be delayed.
6. Managing company FAX Number - Enter business FAX number of the managing company, including area code.
7. Managing company E-mail address - Enter business E-mail of the managing company

#### **BLOCK E - CRAB FACILITY OWNERSHIP INFORMATION**

Complete Block E if you intend to receive fish from an AFA Co-op. ***If a change occurs in the list of crab facilities (owned 10% or more) disclosed in Block E, you must submit an amended application within 30 days of the date of the change.***

Crab Facility Ownership Information - If any of the owners (down to the individual person level) listed in Block D, collectively have a 10% or greater ownership interest with any facility that will process Bering Sea or Aleutian Island king or Tanner crab in the year for which this permit is valid you must provide the following detailed information about those crab facilities. **(A facility includes any processing plant, catcher/processor, mothership, floating processor or any other operation that processes crab.)** Use one group of blocks for each crab facility owned. Attach additional sheets if needed.

1. Crab Facility Name - Enter the name of the crab facility in which the business in Block B or C has a 10% or greater ownership interest.
2. Type of Facility - Enter one of the following:  
processing plant,  
catcher/processor,  
mothership,  
floating processor; or,  
enter description for a type not herein provided.
3. Percent of Collective Ownership of Crab Facility - indicate the total percent of ownership of the crab facility held by the processor in Block B or C.
4. ADF&G Processor Code of owned crab facility - Enter the ADF&G Processor code if this application is for a Catcher/Processor, Mothership or Inshore Processor (example: F0000).
5. Federal Fishery or Federal Processor Permit - NMFS Federal Fishery or Processor Permit (Example AK991234 or PA1234).

**The calculation of collective ownership of a crab processor by a Mothership or Inshore Processor is mathematically multiplicative.**

**For example:** "ABC Corporation" is filling out this application to have a Co-op endorsement on their AFA Permit.

**For Block D:** "ABC Corp." has three owners:

Shareholder 1 (Individual, 15% owner of ABC Corporation)

Shareholder 2 (XY Partnership where Mr. X and Mr. Y are each 50% partners; and

XY Partnership is a 45% owner of ABC Corporation)

Shareholder 3 (Individual, 40% owner of ABC Corporation)

As a result of the business interests of its shareholders, ABC Corporation owns over 10% of each of two facilities that processed king or Tanner crab in the Bering Sea or Aleutian Islands in 1995, 1996 or 1997, and must disclose that ownership by completing Block E. Ownership is calculated in a multiplicative manner as shown in the following cases.

In the first case, Shareholder 1 owns 70% of "Crabby Corporation", which is the sole owner of "Crabby Fisheries," a shoreside plant that processes Crab. Neither ABC shareholder 2 or 3 has any ownership interest in Crabby Corporation. ABC's interest in Crabby Corp. is therefore (15% \* 70%) or 10.5%.

In the second case, shareholder 2's Mr. X is a 60% shareholder of "Diversified Crab Corp.," a corporation that is 55% owner



of the M/V “Krab King,” a floating crab processor. Shareholder 1 has no direct or indirect interest in the processor vessel, but shareholder 3 directly owns 45% of the M/V Krab King. ABC’s interest in the M/V Krab King from Mr. X is (45% \* 50% \* 55% \* 45% = 5.57%) and from Shareholder 3 is (40% \* 45%) = 18% for a total of 23.57%.

**For Block E:**

1. Crab Facility Name: <b>Crabby Fisheries</b>		2. Type of Facility: <b>Shoreside plant</b>
3. Percent of collective ownership <b>10.5%</b>	4. ADF&G Processor Code of owned crab facility: <b>F-1234</b>	5. Federal Fishery or Federal Processor Permit Number of owned crab facility: <b>PA4321</b>
1. Facility Name: <b>M/V Krab King</b>		2. Type of Facility: <b>Floating Processor</b>
3. Percent of collective ownership of crab facility:: <b>23.57%</b>	4. ADF&G Processor Code of owned crab facility: <b>F-4567</b>	5. Federal Fishery or Federal Processor Permit Number of owned crab facility: <b>PA7654</b>

**BLOCK F - CERTIFICATION OF APPLICANT AND NOTARY**

Sign, print and date the application in the presence of Notary Public. As a result of this requirement, **we will not process applications faxed to us.** Representatives acting on behalf of an applicant must submit proof of authorization to submit this application on their behalf.

1. Signature of the owner.
2. Date this application was signed.
3. Printed name of the owner.
- 4-6. Notary Certification. A Notary Public must Attest and affix Notary Stamp. Notary Public verification cannot be completed by the person submitting this application.

---

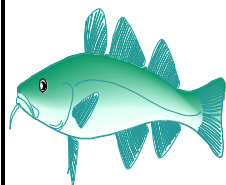
**PUBLIC REPORTING BURDEN STATEMENT**

Public reporting burden for this collection of information is estimated to average 2 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sustainable Fisheries, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802.

**ADDITIONAL INFORMATION**

Before completing this form please note the following: 1) The NMFS may not conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) This information is being used to implement the American Fisheries Act; 3) Federal law and regulations require and authorize NMFS to manage commercial fishing effort; 4) Submission of applicant's name is required of all persons seeking to participate in the groundfish fisheries.

---



**APPLICATION FOR  
AMERICAN FISHERIES ACT  
(AFA)  
INSHORE CO-OP PERMIT**

***Due December 1, 1999***

United States Department of Commerce  
National Oceanic and Atmospheric Administration  
National Marine Fisheries Service  
Alaska Region  
P.O. Box 21668  
Juneau, Alaska 99802-1668



**BLOCK A - CO-OP CONTACT INFORMATION**

1. Co-op Name		2. Name of Co-op Representative
3. Co-op Business Mailing Address (P.O. Box or Street, city, state, zip code)		
4. Business Telephone Number	5. Business FAX Number	6. Business E-mail Address

**BLOCK B - CO-OP PROCESSOR INFORMATION**

<p>1. Name and Physical Location of AFA Inshore Processor to whom the Co-op will deliver at least 90% of its BSAI pollock.</p> <p>If processor is a vessel, the single geographic location (latitude and longitude) at which the processor will process BSAI pollock under the AFA.</p>
2. Federal Fishery Permit or Federal Processor Permit Number of the Inshore Processor.

**BLOCK C - REQUIRED ELEMENTS OF CO-OP CONTRACT**

<p>Is a copy attached of the co-op contract showing the signatures of all parties and vessel owners? Yes [ ] No [ ]</p> <p><b>NOTE: This application is not valid and cannot be processed without the submission of a copy of the co-op contract.</b></p> <p>Is a copy attached of a letter requesting a business review letter on the fishery cooperative from the Department of Justice and any response to such request? Yes [ ] No [ ]</p> <p><b>NOTE: This application is not valid and cannot be processed without the submission of a copy of this information.</b></p> <p>Was the Co-op contract signed by the owners of at least 80% of the qualified catcher vessels that delivered BSAI pollock for processing to the processor in Block B in the directed BSAI pollock fishery, in the year prior to that in which this Co-op would be effective? Yes [ ] No [ ] <b>If NO, this co-op cannot be authorized.</b></p> <p>Did each catcher vessel listed below, during the year prior to the year in which the co-op will be in effect, deliver more pollock to the processor listed in B(1) above than to any other AFA inshore processor? Yes [ ] No [ ] <b>If NO, this co-op cannot be authorized.</b></p> <p>Is each catcher vessel listed below, otherwise eligible to fish for groundfish in the BSAI, has a valid LLP permit, has an AFA catcher vessel permit with an inshore endorsement, and has no permit sanctions or other type of sanctions against it that would prevent it from fishing for groundfish in the BSAI. Yes [ ] No [ ] <b>If NO, this co-op cannot be authorized.</b></p>
--

**BLOCK D - VESSEL INFORMATION**

**All co-op member vessels must be listed.** List complete information for each Co-op catcher vessel member (attach additional pages if necessary).

[illegible]

[illegible]

***BLOCK E- CERTIFICATION OF NOTARY AND APPLICANT***

Under penalty of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information presented hereon is true, correct and complete.

1. Signature of Co-op representative:

2. Date:

3. Printed Name of Co-op representative:

4. Notary Public (Signature):      ATTEST

6. Affix Notary Stamp or Seal Here:

5. Commission Expires:

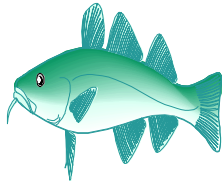
Please mail completed application to **NMFS Alaska Region, Restricted Access Management, P.O. Box 21668, Juneau, AK 99802-1668**. If you need additional information, contact RAM at 1-800-304-4846 or 907-586-7202.

***PUBLIC REPORTING BURDEN STATEMENT***

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing the instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sustainable Fisheries, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802.

***ADDITIONAL INFORMATION***

Before completing this form please note the following: 1) The NMFS may not conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) This information is being used to implement the American Fisheries Act; 3) Federal law and regulations require and authorize NMFS to manage commercial fishing effort; 4) Submission of this information is required of persons requesting replacement of certificates, permits or cards.



## INSTRUCTIONS

### Application for American Fisheries Act Inshore Co-op Permit

***NOTE: This Inshore Co-op Permit Application and any amendments that add or delete co-op member vessels must be received by National Marine Fisheries Service (NMFS), Restricted Access Management (RAM) no later than December 1, for Co-ops to be effective in the following calendar year.***

Type or print legibly in ink; retain a copy of completed application for your records. Completed forms should be mailed to: **NMFS Alaska Region, RAM, P.O. Box 21668, Juneau, AK 99802-1668.** If you need information, contact RAM at 1-800-304-4846 or 907-586-7202. **Please allow at least 10 working days for your application to be processed.** Items will be sent by first class mail, unless you provide alternate instructions *and* include a prepaid mailer with appropriate postage or a corporate account number for express delivery.

#### ***BLOCK A - CO-OP CONTACT INFORMATION***

1. Co-op Name.
2. Name of Co-op Representative.
3. Co-op business mailing address (P.O. Box or Street, city, state, zip code).
4. Business telephone number, including area code.
5. Business FAX number, if available.
6. Business E-mail address, if any.

#### ***BLOCK B - CO-OP PROCESSOR INFORMATION***

1. Name and physical location of AFA inshore processor to whom the co-op will deliver at least 90% of its BSAI pollock. If processor is a vessel, the single geographic location (latitude and longitude) at which the processor will process BSAI pollock under the AFA.
2. Federal fishery permit or federal processor permit number of the inshore processor, as appropriate.

#### ***BLOCK C - REQUIRED ELEMENTS OF CO-OP CONTRACT***

Indicate **YES** or **NO** whether a copy is attached of the co-op contract showing the signatures of all parties and vessel owners? **NOTE: This application is not valid and cannot be processed without the submission of a copy of the co-op contract.**

Indicate **YES** or **NO** whether a copy is attached of a letter requesting a business review letter on the fishery cooperative from the Department of Justice and any response to such request? **NOTE: This application is not valid and cannot be processed without the submission of a copy of this information.**

Indicate **YES** or **NO** if the co-op contract was signed by at least 80% of the qualified catcher vessels that delivered BSAI pollock for processing to the processor in Block B in the directed BSAI pollock fishery in the year prior to that in which this co-op would be effective. **If NO, this co-op cannot be authorized.**

Indicate **YES** or **NO** whether or not each catcher vessel listed in this section, during the year prior to the year in which the co-op will be in effect, deliver more pollock to the processor listed in B(1) than to any other AFA inshore processor.

Indicate **YES** or **NO** whether or not each catcher vessel listed in this section, is otherwise eligible to fish for groundfish in the BSAI, has a valid LLP permit, has an AFA catcher vessel permit with an inshore endorsement, and has no permit sanctions or other type of sanctions against it that would prevent it from fishing for groundfish in the BSAI.

***BLOCK D - VESSEL INFORMATION***

**All co-op member vessels must be listed.** List complete information for each Co-op member catcher vessel (attach additional pages if necessary).

1. Vessel Name - Enter complete vessel name as displayed in official documentation.
2. ADF&G Number - Enter 5-digit ADF&G number (example: 51233).
3. U.S. Coast Guard Number - Enter USCG documentation number (example: 566722) or state registration number (example: AK3456C).
4. AFA Permit Number - Enter the AFA Permit Number.

***BLOCK E - CERTIFICATION OF NOTARY AND APPLICANT***

Sign, Print and date the application in the presence of Notary Public. As a result of this requirement, **we will not process applications faxed to us.** Representatives acting on behalf of an applicant must submit proof of authorization to submit this application on their behalf.

1. Signature of the co-op representative
2. Date this application was signed.
3. Printed name of the co-op representative
- 4-6. Notary Certification. A Notary Public must Attest and affix Notary Stamp. Notary Public verification cannot be completed by the person submitting this application.

---

***PUBLIC REPORTING BURDEN STATEMENT***

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sustainable Fisheries, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802.

***ADDITIONAL INFORMATION***

Before completing this form please note the following: 1) The NMFS may not conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) This information is being used to implement the American Fisheries Act; 3) Federal law and regulations require and authorize NMFS to manage commercial fishing effort; 4) Submission of applicant's name is required of all persons seeking to participate in the groundfish fisheries.

---



**APPLICATION FOR  
AMERICAN FISHERIES ACT (AFA)  
PERMIT FOR  
REPLACEMENT VESSEL**

U.S. Dept. of Commerce/NOAA  
National Marine Fisheries Service  
Restricted Access Management  
P.O. Box 21668  
Juneau, AK 99802-1668



**BLOCK A - IDENTIFICATION OF AFA QUALIFIED VESSEL**

1. Vessel Name:	2. ADF&G Number:	3. U.S. Coast Guard Number:	4. AFA Permit Number:
5. Gross Tons:	6. Shaft Horsepower:	7. Registered Length:	
8. Owner Name(s):		9. SSN or Tax ID:	
10. Business Mailing Address:			
11. Business Telephone Number:	12. Business FAX Number:	13. Business E-mail Address:	
14. What was the last year in which this vessel harvested or processed pollock in a directed pollock fishery in the BSAI?			
15. How was the vessel lost or destroyed?			
<b>U.S. Coast Guard form 2692 or insurance papers verifying the loss must be attached.</b>			

**BLOCK B - IDENTIFICATION OF REPLACEMENT VESSEL**

**U.S. Coast Guard Documentation for this vessel must be attached to this application**

1. Vessel Name:	2. ADF&G Number:	3. U. S. Coast Guard Number:
4. Gross Tons:	5. Shaft Horsepower:	6. Registered Length:
7. Net Tons:	8. Current Length Overall:	9. Federal Fisheries Permit: (if known)
10. Owner Name(s):		11. SSN or Tax ID:
12. Business Mailing Address:		
13. Business Telephone Number:	14. Business FAX Number:	15. Business E-mail Address:
16. Was the vessel built in the United States?      Yes [ ]      No [ ]		
17. Has the vessel ever been rebuilt?      Yes [ ]      No [ ] If Yes, was it rebuilt in the United States?      Yes [ ]      No [ ]		



**BLOCK C - CERTIFICATION OF APPLICANT AND NOTARY**

Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information presented here is true, correct and complete.

1. Signature of Owner

2. Date:

3. Printed Name of owner

4. Notary Public: ATTEST

5. Affix Notary Stamp or Seal Here:

6. Commission Expires:

Please mail completed application to **NMFS Alaska Region, Restricted Access Management, P.O. Box 21668, Juneau, AK 99802-1668**. If you need additional information, contact RAM at 1-800-304-4846 or 907-586-7202.

**Privacy Act Statement:** Federal regulations (at 50 CFR Part 679) authorize collection of this information. This information is used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits.

**PRIVACY ACT STATEMENT:** Your social security number is confidential and is protected under the Privacy Act. Disclosure of your Social Security Number (SSN) is voluntary. The primary purpose for soliciting the social security number is to provide a unique identifier to verify the identity of the applicant(s) for issuance of a federal fishery permit and to avoid inappropriate release of confidential records related to federal commercial fishery permits. In the event it is not provided, NMFS will assign a unique code that will identify your records.

---

**PUBLIC REPORTING BURDEN STATEMENT**

Public reporting burden for this collection of information is estimated to average 0.5 hours per response, including the time for reviewing the instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sustainable Fisheries, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802.

**ADDITIONAL INFORMATION**

Before completing this form please note the following: 1) The NMFS may not conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) This information is being used to implement the American Fisheries Act; 3) Federal law and regulations require and authorize NMFS to manage commercial fishing effort; 4) Submission of this information is required of persons requesting replacement of certificates, permits or cards.

---



## INSTRUCTIONS

### Application for American Fisheries Act (AFA) Permit for Replacement Vessel

Use this application to request replacement of an AFA qualified catcher vessels, catcher/processors, and motherships in the event of total or constructive loss of the qualified vessel. Replacement of AFA qualified vessels is authorized at Section 208(g) of the AFA.

Type or print legibly in ink; retain a copy of completed application for your records. Completed forms should be mailed to: **National Marine Fisheries Service (NMFS) Alaska Region, Restricted Access Management, P.O. Box 21668, Juneau, AK 99802-1668.** If you need information, contact RAM at 1-800-304-4846 or 907-586-7202. **Please allow at least 10 working days for your application to be processed.** Items will be sent by first class mail, unless you provide alternate instructions *and* include a prepaid mailer with appropriate postage or a corporate account number for express delivery.

#### ***BLOCK A - IDENTIFICATION OF AFA QUALIFIED VESSEL***

(provide information as of the time of the actual or constructive loss of the vessel).

1. Vessel Name - Enter complete vessel name as displayed in official documentation.
2. ADF&G Number - Enter 5-digit State of Alaska Department of Fish & Game (ADF&G) number (example: 51233) of qualified vessel.
3. U.S. Coast Guard Number - Enter U.S. Coast Guard (USCG) documentation number (example: 566722) or state registration number (example: AK3456C) of qualified vessel.
4. AFA Permit Number - Enter the AFA Permit Number of the qualified vessel.
5. Gross tons - Enter gross Tons of qualified vessel from USCG documentation/registration.
6. Shaft horsepower - Enter shaft horsepower of qualified vessel from USCG documentation/registration.
7. Registered length - Enter registered length (in feet) of qualified vessel from USCG documentation/registration.
8. Owner Name(s) - Enter the full name(s) of the vessel owner(s). If there is more than one owner, list the principal owner first; the permit will be issued to the first owner listed, with an *et al.* notation. The permit **MUST** be issued to the owner of the vessel, not operators or lessees.
9. Social Security Number or Tax Identification Number - Enter social security number or tax identification number of owner. ***PRIVACY ACT STATEMENT:*** *Your social security number is confidential and is protected under the Privacy Act. Disclosure of your Social Security Number (SSN) is voluntary. The primary purpose for soliciting the social security number is to provide a unique identifier to verify the identity of the applicant(s) for issuance of a federal fishery permit and to avoid inappropriate release of confidential records related to federal commercial fishery permits. In the event it is not provided, NMFS will assign a unique code that will identify your records.*
10. Business Mailing Address - Enter your complete PERMANENT business mailing address, including state and zip code. Your permit will be sent to this address. If you need to have your permit sent to a different address, please enter your PERMANENT business address on the application and attach a note with your alternate address.
11. Business Telephone Number - Enter business telephone number used by the vessel or processor owner, including area code. It is very important that you provide a telephone number where we can contact you, or where we can leave messages for you; if questions arise concerning your application and we cannot contact you by telephone, issuance of your permit will be delayed.
12. Business FAX Number - Enter business FAX number used by the vessel owner, including area code.
13. Business E-mail address - Enter business E-mail used by the vessel owner
14. Enter the last year that the AFA qualified vessel harvested or processed pollock in a BSAI directed pollock fishery.
15. Explain in detail how the qualified vessel was lost or destroyed. **You also must provide USCG form 2692 or insurance papers verifying your claim.**

## **BLOCK B - IDENTIFICATION OF REPLACEMENT VESSEL**

*Coast Guard Documentation for this vessel must be attached to the application*

1. Vessel Name - Enter complete vessel name as displayed in official documentation.
2. ADF&G Number - Enter 5-digit ADF&G number (example: 51233) of qualified vessel.
3. U.S. Coast Guard Number - Enter USCG documentation number (example: 566722) or state registration number (example: AK3456C) of qualified vessel.
4. Gross tons - Enter gross Tons of qualified vessel from USCG documentation/registration.
5. Shaft horsepower - Enter shaft horsepower of qualified vessel from USCG documentation/registration.
6. Registered length - Enter registered Length (in feet) of qualified vessel from USCG documentation/registration.
7. Net tons - Enter registered Net tonnage (U.S. tons) as stated in official documentation.
8. Current length overall - Enter current length overall (in feet).
9. Federal Fisheries Permit - Enter Federal Fisheries Permit number, if known.
10. Owner Name(s) - Enter the full name(s) of the vessel owner(s). If there is more than one owner, list the principal owner first; the permit will be issued to the first owner listed, with an *et al.* notation. The permit **MUST** be issued to the owner of the vessel, not operators or lessees.
11. Social Security Number or Tax Identification Number - Enter social security number or tax identification number of owner. **PRIVACY ACT STATEMENT:** *Your social security number is confidential and is protected under the Privacy Act. Disclosure of your Social Security Number (SSN) is voluntary. The primary purpose for soliciting the social security number is to provide a unique identifier to verify the identity of the applicant(s) for issuance of a federal fishery permit and to avoid inappropriate release of confidential records related to federal commercial fishery permits. In the event it is not provided, NMFS will assign a unique code that will identify your records.*
12. Business Mailing Address - Enter your complete PERMANENT business mailing address, including state and zip code. Your permit will be sent to this address. If you need to have your permit sent to a different address, please enter your PERMANENT business address on the application and attach a note with your alternate address.
13. Business Telephone Number - Enter business telephone number used by the vessel owner, including area code. It is very important that you provide a telephone number where we can contact you, or where we can leave messages for you; if questions arise concerning your application and we cannot contact you by telephone, issuance of your permit will be delayed.
14. Business FAX Number - Enter business FAX number used by the vessel owner, including area code.
15. Business E-mail address - Enter business E-mail used by the vessel owner
16. Was the vessel built in the United States? Answer YES or NO, as appropriate.
17. Has the vessel ever been rebuilt? Answer YES or NO. If YES, was it rebuilt in the United States? Answer YES or NO as appropriate.

## **BLOCK C - CERTIFICATION OF APPLICANT AND NOTARY**

1. Signature of the owner.
2. Date this application was signed.
3. Printed name of the owner.
- 4-6. Notary Certification. A Notary Public must Attest and affix Notary Stamp. Notary Public verification cannot be completed by the person submitting this application.

Sign, Print and date the application in the presence of Notary Public. As a result of this requirement, **we will not process applications faxed to us.** Representatives acting on behalf of an applicant must submit proof of authorization to submit this application on their behalf.

***PUBLIC REPORTING BURDEN STATEMENT***

Public reporting burden for this collection of information is estimated to average 0.5 hours per response, including the time for reviewing the instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sue Salveson, Sustainable Fisheries, NMFS, P.O. Box 21668, Juneau, AK 99802.

***ADDITIONAL INFORMATION***

Before completing this form please note the following: 1) The NMFS may not conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) This information is being used to manage the Limited Access Programs; 3) Federal law and regulations require and authorize NMFS to manage commercial fishing effort; 4) Submission of this information is required of persons requesting replacement of certificates, permits or cards